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Docket No. SP-1598.2 US

JAN 08 2007

CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this document, together with all enclosures identified herein, is being facsimile transmitted to the United States Patent and Trademark Office (Fax No. 571 273-8300) on the date indicated below.

January 08, 2007
Date


Shirley O'Donnell

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Alessio
Application Number : 10/518,219
Filing Date : December 16, 2004
For : LED LIGHTING DEVICE
Art Unit : 2875
Examiner : Gunyoung T. Lee
Confirmation No. : 5728

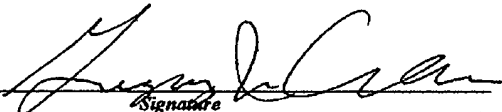
REPLY TO OFFICE ACTION DATED 10/12/2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Favorable reconsideration of the above-identified application is respectfully requested in view of the following remarks.

JAN 08 2007

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. SP-1598.2 US	
Applicant(s): Alessio					
Application No. 10/518219	Filing Date 12/16/04	Examiner Gunyoung T. Lee	Customer No. 20875	Group Art Unit 2875	Confirmation No. 5728
Invention: LED LIGHTING DEVICE					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 05-1325 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 <small>Signature</small>			Dated: 1/8/07		
<div style="border: 1px solid black; padding: 5px;">Gregory J. Adams Reg. No. 44,494 Eveready Battery Company, Inc. 25225 Detroit Road Westlake, Ohio 44145</div>					
CC:					

P11LARGE/REV10